



COMMERCIAL FEED COMPANY REGISTRATION APPLICATION
NEW COMPANY
February 1, 2010 - January 31, 2011

ICS/Feed Program
700 Kipling Street, #4000
Lakewood, CO 80215-8000
(303) 477-0081
www.colorado.gov/ag/ics

Instructions:

Send ALL completed application forms along with payment to the address above left. Make check payable to "Colorado Department of Agriculture."

INCOMPLETE APPLICATIONS WILL BE RETURNED

Fee:

Registration \$ 100.00

Total Due (must be enclosed) \$ 100.00

Name of firm listed on product label is operating as: ☐ Partnership ☐ Corporation
☐ Individual/Sole Proprietorship - (Must Complete Citizenship/Immigration Status Verification Form.)
☐ Other (describe): _____

Name of firm listed on product label:

Mailing Address:

Street Address (if different):

City:	State:	Zip:
Contact:	E-Mail:	Other Phone:
Fax:	Toll-Free Phone:	Website:

Name of firm submitting application (if different from above):

Mailing Address:

Street Address (if different):

City:	State:	Zip:
Contact:	E-Mail:	Other Phone:
Fax:	Toll-Free Phone:	Website:

Type of firm listed on product label (check all that apply):

☐ Manufactures or Distributes Medicated Feed ☐ Manufactures or Distributes Non-Medicated Feed
(includes pet foods, treats, supplements, ingredients etc.)

Livestock or other commercial, non-pet feed (check all that apply):

<input type="checkbox"/> Products Sold in Weights 10 Lbs. or Under	<input type="checkbox"/> Liquid Feed	<input type="checkbox"/> Complete Feed	<input type="checkbox"/> Custom Mixes
<input type="checkbox"/> Products Sold in Weights Over 10 Lbs.	<input type="checkbox"/> Supplements	<input type="checkbox"/> Ingredients	<input type="checkbox"/> Other

Dog/cat food and/or specialty pet food (check all that apply):

<input type="checkbox"/> Products Sold in Weights 10 Lbs. or Under	<input type="checkbox"/> Supplements	<input type="checkbox"/> Treats	
<input type="checkbox"/> Products Sold in Weights Over 10 Lbs.	<input type="checkbox"/> Complete and Balanced	<input type="checkbox"/> Other	Complete other side ->

Is the manufacturing facility(ies) for these feeds/pet foods located in Colorado? r Yes r No
If "Yes," list location(s) below:

Name of Facility (if different):		
Mailing Address:		
Street Address (if different):		
City:	State:	Zip:
Contact:	Email:	Phone:

I certify that all statements made in this application are true, correct and complete to the best of my knowledge and belief, and are made in good faith. I understand that making false statements on this application is punishable by law.

Signature/Title

Date

Print Name